

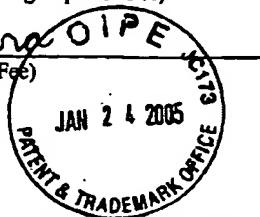
CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, PO Box 1450, Alexandria, VA , 22313-1450 on January 20, 2005

Jeannie Camara

(Typed or Printed Name of Person Mailing Paper or Fee)

(Signature of Person Mailing Paper or Fee)



PATENT APPLICATION
Attorney Docket No. SUN-P5755

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE PATENT APPLICATION OF

Rodger P. Wilson

Serial No. 09/847,555

Filing Date: May 2, 2001

Title: **METHOD, SYSTEM, AND PROGRAM FOR
ENCRYPTING FILES IN A COMPUTER
SYSTEM**

)
Examiner: Norman M. Wright
)
Group Art Unit: 2134
)
)
)
)

AMENDMENT TRANSMITTAL LETTER

Mail Stop: Non-Fee Amendment
Assistant Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In connection with the above-referenced U. S. patent application, transmitted herewith are the following papers:

- Response under 37 C.F.R. § 1.111 to official action mailed December 15, 2004.
- A petition for extension of time is also enclosed with a fee of \$55.00 for a one-month extension for a small entity.
- Terminal disclaimer under 37 C.F.R. § 1.321(c), including
- check for \$110.00 fee under 37 C.F.R. § 1.20(d), and
- 2 certificates under 37 C.F.R. § 3.73(b).
- Information disclosure statement, form 1449 and ___ references.
- No additional claims fees are required.

An additional fee is required, and is calculated as shown below:

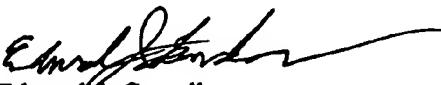
AMENDED CLAIMS					
	NO. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	ADDTL FEE
Total Claims		MINUS = 20	0	x \$18 =	
Independent Claims		MINUS = 3	0	x \$78 =	
If Amendment adds multiple dependent claims, add \$260.00					
Total Amendment Fee					
If small entity status is claimed, subtract 50% of Total Amendment Fee					
TOTAL ADDITIONAL FEE DUE FOR THIS AMENDMENT					\$0.00

A check in the amount of \$____ is enclosed.
 Charge \$____ to Deposit Account No. ____ (Docket No. ____).
 Please deduct any underpayments, credit any overpayments, and charge all required extension of time fees to Deposit Account Number 50-1003. (Docket No. SUN-P5755).

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Respectfully submitted,

By


Edward J. Grundler
Registration No. 47,615

Date: January 20, 2005